#### FOR INSTRUCTIONS, SEE BACK OF FORM

## **DISCLOSURE SUMMARY PAGE**

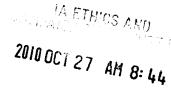
File with: Iowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State

Reset Form

Parties must be filed electronically.



COMMITTEE NAME (Must be same as on Statement of Org	anization)			
Reasoner For State Representative			ORM	
IMPORTANT: Indicate by # type of committee you are reporting for: (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Cand Subdivision Candidate (8) County PAC (9) City PAC (10) School 11) Local Ballot Issue	2 )State PAC(3 )State Party sidate(7 )School Board or Other Political	(Re	Office Use On	1415
CANDIDATE COMMITTEES ONLY:	D. C. L. D. L. ('Constitution')		ged In WW	
Candidate Name Michael J. Reasoner	Political Party (if applicable)  Democratic		•	<del></del>
Wichael J. Reasonel		1 1		
Office Sought State Representative	District (if Senate or House)	Aud		
Late reports are subject to possible civil and criminal penalties. Per candidate's committee, and the chairperson, for any other type of signature of Person Filing Report	committee, is the individual responsible  CH1-782-2693  TELEPHONE	for filing tim	401(3), the can sely and accurately accurately and accurately accurately and accurately	ite reports.
SIGNATURE OF PERSON FIELDS REFORM				
I AM FILING A Tuesday preceding general (10-26-10)	REPORT FOR (1) ELECTION	(2)NON-E	LECTION YE	AR.
(report date)	Indicate by #	1		
☐CHECK IF AMENDMENT TO REPORT DATED		ocal Comm	ittees, enter Da	te of Election
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file		County & Lo which Election		, enter County in
STATEMENT OF CASH ON HAN	ID			
CASH ON HAND at the beginning of the reporting period. (To committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	e cash on hand at the end	\$	35,619.82	
ADD TOTAL MONEY TAKEN IN THIS PERIOD				
Schedule A: Cash Contributions total (Attach Sche	dule A) (*also see in-kind below)		12,900.00	
Schedule F: Loans Received total (Attach Schedul	e F)		0.00	
Schedule H: Total Sales of Campaign Property (At	tach Schedule H)		0.00	
(Schedule H applies to Candidates' Cor	nmittees Only)			
	SUB-TOTAL	\$	48,519.82	
SUBTRACT TOTAL MONEY SPENT THIS PERIO	D			
Schedule B: Expenditures total (Attach Schedule B	3) (**also see debts and loans below)		30,740.11	
Schedule F: Loan Repayments total (Attach Sched	dule F)		0.00	
CASH ON HAND at the end of this reporting period (if final re	eport balance must be zero)	\$	17,779.71	
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0.00	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch			0.00	
**OUTSTANDING LOANS (From Schedule F - Attach Sched			0.00	
CONSULTANT BREAKDOWN (Schedule G Attached?)	<b>7</b>	<b>-</b>		NO
CANDIDATE COMMITTEES ONLY:				-
VALUE OF CAMPAIGN PROPERTY (From Schedule H - A	ttach Schedule H)	\$		
11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		₹.		

#### For Instructions, See Back of Form

## Reset Form

### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
Reasoner For State Representative	

SCHEDULE		
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS	
CHECK THIS BOX IF AMENDING FORM		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10-15-10	ID# <sub>6001</sub> CK# <sub>4570000388</sub>	Nationwide Mutual Insurance PAC 1100 Locust Road Des Moines, Iowa 50391		\$ 250.00	
10-15-10	1D# 6070 CK# <sub>4110</sub>	Iowa Law PAC 625 East Court Avenue Des Moines, Iowa 50309-1904		750.00	
10-18-10	1D# 9805 CK# 1027	Educational Opportunities PAC P.O. Box 12039 Des Moines, Iowa 50312		750.00	
10-18-10	ID# 8052 CK# 6109	DuPont Good Government Fund 1007 Market Street Wilmington, Delaware 19898		200.00	
10-18-10	ID# 6351 CK# <sub>1640</sub>	Petroleum Marketers and Convenience Stores PAC 10430 New York Avenue, Suite F Urbandale, Iowa 50322-3773		4,000.00	
10-20-10	ID# 6498 CK# 2106	Well PAC P.O. Box 9232 Des Moines, Iowa 50306-9232		500.00	
10-20-10	OK# <sub>1213</sub>	Iowa Harness Horseman's Association PAC P.O. Box 107 Grinnell, Iowa 50112		150.00	
10-21-10	ID# <sub>9724</sub> CK# <sub>3012</sub>	Iowa Federation of Animal Owners 701 East 1st Avenue Indianola, Iowa 50125		300.00	
10-21-10	ID# <sub>9743</sub> CK# <sub>193</sub>	Iowa Turkey Federation PAC P.O. Box 825 Ames, Iowa 50010-0825		500.00	
10-21-10	ID# CK#	Mary Greiner 1412 J Place Kalona, Iowa 52247		25.00	
· · · · · · · · · · · · · · · · · · ·			SUB-TOTAL	7.405.00	I .

TOTAL (if last page of this schedule)

Page \_\_\_\_\_ of \_\_\_3\_\_\_\_

7,425.00

\$

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### For Instructions, See Back of Form

## Reset Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)	
Reasoner For State Representative	

١	SCHEDULE	
	<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
		CK THIS BOX IF NDING FORM

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10-21-10	ID# CK#	Dennis Breder 1304 North Street Mediapolis, Iowa 52637		\$ 150.00	
10-21-10	ID# CK#	Kathleen Weber 3213 Highway 8 Dysart, Iowa 52224		150.00	
10-21-10	1D# 9748 CK# 1147	Midwest PAC 1636 NW 114th Street Clive, Iowa 50325-7071		100.00	
10-21-10	ID# CK#	Nancy Eichelberger P.O. Box 8, 208 West Depot Wayland, Jowa 52654		25.00	
10-21-10	ID# CK#	Jerome Vittetoe 2504 Quince Avenue Washington, Iowa 52353		25.00	
10-21-10	ID# CK#	Char Brenneman 1551 Larch Avenue Washington, Iowa 52353-9251		25.00	
10-23-10	ID# <sub>9659</sub> CK# <sub>1693</sub>	Federation of Iowa Insurers PAC P.O. Box 1756 Des Moines, Iowa 50306-1756		250.00	
10-23-10	ID# CK#	William Allan Jones III 450 Anatole Lane NW Cleveland, Tennessee 37312		2,500.00	
10-23-10	ID# 6059 CK# 3606	Iowa Committee of Automotive Retailers 1111 Office Park Road West Des Moines, Iowa 50265		500.00	
10-23-10	ID# 8032 CK# 24416	NRA - Political Victory Fund 11250 Waples Mills Road Fairfax, Virginia 22030-7400		250.00	
			SUB-TOTAL	3 975 00	

TOTAL (if last page of this schedule)

Page 2 of 3 (for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

#### For Instructions, See Back of Form

# Reset Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

	COMMITTEE NAME (Must be same as on Statement of Organization)
ļ	Reasoner For State Representative

SCHEDULE	
<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
CHECK THIS BOX IF AMENDING FORM	

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10-25-10	ID# <sub>8251</sub> CK# <sub>2397</sub>	PrinPAC 711 High Street Des Moines, Iowa 50392		\$ 500.00	
10-25-10	1D# 6485 CK# 1054	Krause Gentle PAC 6400 Westown Parkway West Des Moines, Iowa 50266-7709		500.00	
10-25-10	ID# CK#	W.A. Krause Revocable Trust 6400 Westown Parkway West Des Moines, Iowa 50266		500.00	
	ID# CK#				
-	ID# CK#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	\$ 1,500.00	

TOTAL (if last page of this schedule)

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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FOR INSTRUCTIONS, SEE BACK OF FORM

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### **EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE  B (Rev. 07/03)	MONETARY EXPENDITURES
CHE	CK THIS BOX IF

COMMITTEE NAME (Must be same as on Statement of Organization)

Reasoner For State Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-15-10	ID# CK#	Garner Printing 1697 NE 53rd Avenue Des Moines, Iowa 50313-2180	Literature, postage and handling	\$ 18,000.00
10-17-10	ID# CK#	Mike Reasoner 702 New York Avenue Creston, Iowa 50801	Reimbursement - Toner and labels	89.86
10-20-10	ID# CK#	US Postal Service Creston, Iowa 50801	Stamps	2,240.00
10-24-10	ID# CK#	Garner Printing 1697 NE 53rd Avenue Des Moines, Iowa 50313-2180	Literature, postage and handling	7,353.75
10-26-10	ID# CK#	Mike Reasoner 702 New York Avenue Creston, Iowa 50801	Mileage - 726 x .50	363.00
10-26-10	ID# CK#	American Directions Group 1350Connecticut Ave, NW,Ste1102 Washington, DC 20036	Campaign voter research	2,673.50
10-26-10	ID# CK#	Iowa State Savings Bank 401 West Adams Street Creston, Iowa 50801	Transaction fee	20.00
	ID# CK#			

SUB-TOTAL

TOTAL (if last page of this schedule)

\$ 30,740.11 \$ 30,740.11

### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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